

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Declaration for Patent Application

As a named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name;

I believe I am the original, first and sole inventor (if only one name is listed) or an original, first and joint inventor (if plural names are listed in the signatory page(s) commencing at page 3 hereof) of the subject matter which is claimed and for which a patent is sought on the invention entitled

NON SELF-INACTIVATING, EXPRESSION TARGETED RETROVIRAL

VECTORS

the specification of which (check one)

is attached hereto.

was filed on _____ as United States Application Number or PCT International Application Serial No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is known by me to be material to patentability as defined in 37 C.F.R. §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

			Priority Not Claim
<u>PCT/EP95/03445</u> (Number)	<u>PCT</u> (Country)	<u>(Day/Month/Year filed)</u>	<input type="checkbox"/>
<u>1017/94</u> (Number)	<u>Danish</u> (Country)	<u>(Day/Month/Year filed)</u>	<input type="checkbox"/>
<u>(Number)</u>	<u>(Country)</u>	<u>(Day/Month/Year filed)</u>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below.

<u>(Application Number)</u>	<u>(Filing Date)</u>
<u>(Application Number)</u>	<u>(Filing Date)</u>

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information known by me to be material to patentability as defined in 37 C.F.R. §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.) (Filing date) (Status, patented, pending, abandoned)

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(Application Serial No.) (Filing date) (Status, patented, pending, abandoned)

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

I also hereby grant additional Powers of Attorney to the following attorney(s) and/or agent(s) to file and prosecute an international application under the Patent Cooperation Treaty based upon the above-identified application, including a power to meet all designated office requirements for designated states:

David E. Brook	Reg. No. 22,592	Thomas O. Hoover	Reg. No. 32,470
James M. Smith	Reg. No. 28,043	Alice O. Carroll	Reg. No. 33,542
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and _____

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole
or first inventor Walter Henry Günzburg
Inventor's
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Full name of third joint
inventor, if any _____

Inventor's
Signature _____ Date _____

Residence _____

Citizenship _____

Post Office Address _____